



OFFICE OF THE GOVERNOR

GRAY DAVIS

APPLICATION FORM

1. Mr. _____
Mrs. _____
Ms. _____ First _____ Middle _____ Last _____
2. Position Sought:
1) _____
2) _____
3) _____
4) _____
5) _____
3. Driver's License #: _____ 4. Date of Birth: _____
5. Social Security #: _____ 6. If married, name of spouse: _____
7. Sex: _____ M _____ F
8. Residence Address: _____

City _____ County _____ State _____ Zip _____
Phone (____) _____ FAX (____) _____ E-Mail _____
9. Business Title: _____
Company: _____
Address: _____

City _____ County _____ State _____ Zip _____
Phone (____) _____ FAX (____) _____ E-Mail _____
Pager (____) _____ Cellular (____) _____ Emergency # (____) _____
10. Are you a registered voter? _____ Yes _____ No 11. Ethnicity (Opt.) _____

County: _____

12. Party Affiliation: _____

13. Work Experience (Current to last 12 years)

<i>Employer</i>	<i>Title/Type of Business</i>	<i>City/State</i>	<i>From</i>	<i>To</i>
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

14. Educational History:

<i>College/Graduate School (Location)</i>	<i>Date</i>	<i>Degree</i>	<i>Major</i>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. Please list professional licenses and certificates.

<i>Licenses/Certificates</i>	<i>Date Issued</i>	<i>Licenses/Certificates</i>	<i>Date Issued</i>
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1) _____	_____	3) _____	_____
2) _____	_____	4) _____	_____

16. List all current organizations and societies of which you are a member:

<i>Organizations/Societies</i>	<i>From</i>
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_____	_____
_____	_____

17. Many positions require the appointment of persons with special background, experience, etc. Please indicate below those categories for which you may qualify. Please mark only the category which specifically describes your current occupation, employment or status.

<input type="checkbox"/> Advanced Technology	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Attorney
<input type="checkbox"/> Business	<input type="checkbox"/> Communications	<input type="checkbox"/> Education
<input type="checkbox"/> Environment	<input type="checkbox"/> Financial Institutions	<input type="checkbox"/> Higher Education
<input type="checkbox"/> Insurance	<input type="checkbox"/> Labor	<input type="checkbox"/> Law Enforcement
<input type="checkbox"/> Legislation	<input type="checkbox"/> Local Government	<input type="checkbox"/> Health
<input type="checkbox"/> Small Business	<input type="checkbox"/> Social Services	<input type="checkbox"/> Student
<input type="checkbox"/> Veteran	<input type="checkbox"/> Other (explain) _____	

18. ___Yes ___No Have you resided at your current residence less than 5 years? If yes, please list all residences for the past 5 years.
19. ___Yes ___No Are you a citizen of a country other than the United States? If so, please identify country.
20. ___Yes ___No Have you ever been affiliated (as an officer, owner, director, trustee, partner, advisor or consultant) with any institutions (corporations, firms, partnerships, business enterprises, non-profit organizations, etc.) within the past five years which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain.
21. ___Yes ___No Do you own real property, personal property, financial holdings or receive income from any source which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain.
22. ___Yes ___No Do you have a spouse who is currently an employee or appointee of the State of California? If so, what is the entity, location and title?
23. ___Yes ___No Have you ever been convicted of a violation of any federal, state, county or municipal law, regulation or ordinance (including traffic violations for which a fine of \$100.00 or more was imposed, this includes driving under the influence of alcohol and/or drugs)? If yes, please explain.
24. ___Yes ___No Are you currently under federal, state or local investigation for possible violation of a criminal law or ordinance? If yes, please explain.
25. ___Yes ___No Has a tax lien or other collection procedure ever been instituted against you by federal, state or local authorities? If yes, please explain.
26. ___Yes ___No Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct by or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain.
27. ___Yes ___No Have you ever been involved in civil litigation, or administrative or legislative proceedings of any kind, either as plaintiff, defendant, respondent, witness or party in interest? If yes, please explain.
28. ___Yes ___No Have you ever run for political office, served on a political committee, or been identified publicly with a particular political organization, candidate or issue? If yes, please explain.
29. ___Yes ___No Have you been publicly identified, in person or by organizational members, with a particularly controversial national, state or local issue? If yes, please explain.
30. ___Yes ___No Have you ever submitted oral or written views to any government authority or the news media, on any particular controversial issue other than in an official government capacity? If yes, please explain.
31. ___Yes ___No Have you ever written any particularly controversial books or articles. If yes, please explain.
32. ___Yes ___No Have you ever had any association with any person or group or business venture which could be used, even unfairly, to impugn or question your character and qualifications for the requested appointment? If yes, please explain.
33. ___Yes ___No Do you know anyone who might take any steps, overtly or covertly, to oppose your appointment? If yes, please explain.
34. ___Yes ___No Is there anything in your background which if made known to the general public through your appointment would cause an embarrassment to you and/or the administration? If yes, please feel free to explain.

35. ___Yes ___No Can you perform the functions of this job (essential and/or marginal), with or without reasonable accommodation?
36. ___Yes ___No Are you applying for a position on a board or commission that the Governor is required to appoint people with disabilities? If so, please identify your disability.
37. Please identify your state Senator and Assemblymember.
- Senator _____ Assemblymember _____
38. Please explain why you wish to serve in Governor Davis' administration.
39. What is your vision for California?
40. If the Governor were to appoint you to the position you are seeking today, what are the first two or three things you would do immediately?
41. How do you feel you would add value to the Davis Administration? What unique characteristics, qualifications, perceptions and experiences would you bring to the Administration?
42. What additional information would you like us to know to better assess your suitability for Governor Davis' Administration?
43. If applying for an exempt position, please answer the following additional questions:
- ◆ Please describe your management style.
 - ◆ What is the largest number of employees you have had under your direct and indirect supervision?
 - ◆ How familiar are you with State Government and the Agency or Department for which you are applying?

FOR FAIR BOARD APPOINTMENTS ONLY

Do you or any members of your immediate family:

- | | |
|------------------|---|
| (a) ___yes ___no | Own any interest in any enterprise which does or might do business with the fair? |
| (b) ___yes ___no | Own any interest in any real property adjacent to or in proximity with the fairgrounds? |
| (c) ___yes ___no | Have any interests or associations which might present a conflict of interest? |
| (d) ___yes ___no | Currently serve as an elected city or county official? |

AUTHORIZATION AND RELEASE

I understand that in connection with this application for appointment an extensive investigation of my personal and business background will be conducted. I hereby authorize the release of any and all information pertaining to me or businesses in which I participated, including information of a confidential or privileged nature in the possession of government or private agencies or individuals. I hereby release all such agencies or individuals who furnish such information from liability for damages which may result from furnishing the information requested. I am also aware that a consumer credit report may be requested and used in connection with this application for appointment. The source of the report will be a major national credit reporting agency, such as TRW, TRANSUNION, or EQUIFAX. In the event such a request is made, a copy of the report will be provided to me.

Date: _____

By: _____

Applicant